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Bib Data Sheet

CONFIRMATION NO. 9962

SERIAL NUMBER 10/039,929	FILING DATE 11/06/2001  RULE	CLASS 370	GROUP ART UNIT 2665	ATTORNEY DOCKET NO. P13047
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## APPLICANTS

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\*\* CONTINUING DATA \*\*\*\*\*

None LK / 5/9/05

\*\* FOREIGN APPLICATIONS \*\*\*\*\*

NORWAY 20005754 11/14/2000

yes LK 5/9/05

IF REQUIRED, FOREIGN FILING LICENSE GRANTED

\*\* 02/01/2002

Foreign Priority claimed <input checked="" type="checkbox"/> yes <input type="checkbox"/> no	STATE OR	SHEETS	TOTAL	INDEPENDENT
35 USC 119 (a-d) conditions met <input checked="" type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after Allowance	COUNTRY	DRAWING	CLAIMS	CLAIMS
Verified and Acknowledged	NORWAY	3	6	1
Examiner's Signature _____ Initials LK				

## ADDRESS

27045  
 ERICSSON INC.  
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## TITLE

Managed HDSL repeater

FILING FEE  RECEIVED	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees
		<input type="checkbox"/> 1.16 Fees ( Filing )  <input type="checkbox"/> 1.17 Fees ( Processing Ext. of time )